

Department of Pesticide Regulation



REQUEST FOR VOLUNTARY CANCELLATION OF PESTICIDE PRODUCT REGISTRATION IN CALIFORNIA

I hereby request voluntary cancellation of the listed pesticide product registration(s) in California, effective immediately. I understand that by voluntarily canceling my product registration(s) in accordance with Food and Agricultural Code Section 12828.5, I am waiving my right to a hearing on the cancellation(s).

USEPA/CA REGISTRATION NUMBER	PRODUCT BRAND NAME
Signature of Representative	Printed Name of Representative
Telephone Number	Firm Name
Date Signed	
Return this form to the Pesticide Registration address. If you elect to transmit it by facsimithe FAX number is (916) 324-1719.	
[PR-REG-033, 05-2000]	
2.	